

AO 440 (Rev. 02/09) Summons in a Civil Action

# UNITED STATES DISTRICT COURT

for the

Eastern District of New York

Allstate Insurance Company, Allstate Indemnity Company,  
Allstate Property & Casualty Insurance Company, Allstate New Jersey Insurance  
Company, and Allstate Vehicle and Property Insurance Company F/K/A Deerbrook  
Insurance Company

*Plaintiff*

v.

Alexander Bank, Robert D. Solomon, M.D., Richmond Radiology, P.C., and ALBA Management, Inc.

*Defendant*

Civil Action No.

## SUMMONS IN A CIVIL ACTION

To: *(Defendant's name and address)* Alexander Bank  
163 Four Corners Road  
Staten Island, NY 10304

A lawsuit has been filed against you.

Within 20 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

Richard King, Esq.  
Smith & Brink, P.C.  
1325 Franklin Ave, Ste 320  
Garden City, NY 11530

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

CLERK OF COURT

Date: \_\_\_\_\_

\_\_\_\_\_  
*Signature of Clerk or Deputy Clerk*

Civil Action No. \_\_\_\_\_

**PROOF OF SERVICE**

*(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))*

This summons for *(name of individual and title, if any)* \_\_\_\_\_  
was received by me on *(date)* \_\_\_\_\_.

☐ I personally served the summons on the individual at *(place)* \_\_\_\_\_  
\_\_\_\_\_ on *(date)* \_\_\_\_\_; or

☐ I left the summons at the individual's residence or usual place of abode with *(name)* \_\_\_\_\_  
\_\_\_\_\_, a person of suitable age and discretion who resides there,  
on *(date)* \_\_\_\_\_, and mailed a copy to the individual's last known address; or

☐ I served the summons on *(name of individual)* \_\_\_\_\_, who is  
designated by law to accept service of process on behalf of *(name of organization)* \_\_\_\_\_  
\_\_\_\_\_ on *(date)* \_\_\_\_\_; or

☐ I returned the summons unexecuted because \_\_\_\_\_; or

☐ Other *(specify)*: \_\_\_\_\_

My fees are \$ \_\_\_\_\_ for travel and \$ \_\_\_\_\_ for services, for a total of \$ 0.00.

I declare under penalty of perjury that this information is true.

Date: \_\_\_\_\_

\_\_\_\_\_  
*Server's signature*

\_\_\_\_\_  
*Printed name and title*

\_\_\_\_\_  
*Server's address*

Additional information regarding attempted service, etc:

# **NYS Department of State**

## **Division of Corporations**

### **Entity Information**

The information contained in this database is current through April 16, 2012.

**Selected Entity Name:** RICHMOND RADIOLOGY P.C.

#### **Selected Entity Status Information**

**Current Entity Name:** RICHMOND RADIOLOGY P.C.

**Initial DOS Filing Date:** SEPTEMBER 13, 2000

**County:** RICHMOND

**Jurisdiction:** NEW YORK

**Entity Type:** DOMESTIC PROFESSIONAL CORPORATION

**Current Entity Status:** ACTIVE

#### **Selected Entity Address Information**

**DOS Process** (Address to which DOS will mail process if accepted on behalf of the entity)

RICHMOND RADIOLOGY P.C.  
2025 RICHMOND AVENUE  
STATEN ISLAND, NEW YORK, 10314

#### **Chairman or Chief Executive Officer**

STEVE LOSIK MD  
2025 RICHMOND AVE  
STATEN ISLAND, NEW YORK, 10314

#### **Principal Executive Office**

RICHMOND RADIOLOGY P.C.  
2025 RICHMOND AVE  
STATEN ISLAND, NEW YORK, 10314

#### **Registered Agent**

NONE

This office does not record information regarding the names and addresses of officers, shareholders or directors of nonprofessional corporations except the chief executive officer, if provided, which would be listed above. Professional corporations must include the name(s) and address(es) of the initial officers, directors, and shareholders in the initial certificate of incorporation, however this information is not recorded and only available by viewing the certificate.

#### **\*Stock Information**

#### **Name History**

<b># of Shares</b>	<b>Type of Stock</b>	<b>\$ Value per</b>	<b>Filing Date</b>	<b>Name Type</b>	<b>Entity Name</b>
200	No Par Value				RICHMOND RADIOLOGY

Entity Information

SEP 13, 2000      Actual      P.C.

\*Stock information is applicable to domestic business corporations.

A **Fictitious** name must be used when the **Actual** name of a foreign entity is unavailable for use in New York State. The entity must use the fictitious name when conducting its activities or business in New York State.

**NOTE:** New York State does not issue organizational identification numbers.

# NYS Department of State

## Division of Corporations

### Entity Information

The information contained in this database is current through April 16, 2012.

**Selected Entity Name:** ALBA MANAGEMENT, INC.

**Selected Entity Status Information**

**Current Entity Name:** ALBA MANAGEMENT, INC.

**Initial DOS Filing Date:** MARCH 28, 2000

**County:** RICHMOND

**Jurisdiction:** NEW YORK

**Entity Type:** DOMESTIC BUSINESS CORPORATION

**Current Entity Status:** INACTIVE - Dissolution (Dec 24, 2009)

**Selected Entity Address Information**

**DOS Process** (Address to which DOS will mail process if accepted on behalf of the entity)

ALBA MANAGEMENT, INC.  
2025 RICHMOND AVE  
STATEN ISLAND, NEW YORK, 10314

**Chairman or Chief Executive Officer**

ALEXANDER BANK  
2025 RICHMOND AVE  
STATEN ISLAND, NEW YORK, 10314

**Principal Executive Office**

ALBA MANAGEMENT, INC.  
2025 RICHMOND AVE  
STATEN ISLAND, NEW YORK, 10314

**Registered Agent**

NONE

This office does not record information regarding the names and addresses of officers, shareholders or directors of nonprofessional corporations except the chief executive officer, if provided, which would be listed above. Professional corporations must include the name(s) and address(es) of the initial officers, directors, and shareholders in the initial certificate of incorporation, however this information is not recorded and only available by viewing the certificate.

*Stock Information			Name History		
# of Shares	Type of Stock	\$ Value per	Filing Date	Name Type	Entity Name
200	No Par Value				ALBA MANAGEMENT,

Entity Information

MAR 28, 2000 Actual INC.

\*Stock information is applicable to domestic business corporations.

A **Fictitious** name must be used when the **Actual** name of a foreign entity is unavailable for use in New York State. The entity must use the fictitious name when conducting its activities or business in New York State.

**NOTE:** New York State does not issue organizational identification numbers

**Service of Process Cover Sheet**

FOR DOS USE ONLY

(1) Indicate the name of the entity or person to be served. (See Note 1 below):

ALBA Management, Inc.

(2) If serving a domestic entity or an authorized foreign entity, staple the DOS search page(s) (the "Current Status Information" and, if applicable, the "Filing History Information" and/or the "Name History Information") for the entity to be served to this cover sheet.

(3) Indicate the Section of Law under which service is made. Check only one box. (See Note 2 below):

Domestic or Authorized Foreign Entities (Applicable fee: \$40.00)

- ☐ Business Corporation Law §306  
☐ Not-for-Profit Corporation Law §306  
☐ Limited Liability Company Law §303  
☐ Partnership Law §121-109(a) (LP's)  
☐ Partnership Law §121-1502 (foreign LLP's)  
     (must serve a Deputy Secretary of State)  
☐ Partnership Law §121-1505 (LLP's)  
☐ Real Property Law §339-n  
☐ General Associations Law §19  
     (must serve a Deputy Secretary of State)

☒ Other: specify section of law 18 U.S.C. Sec. 1962  
 and applicable fee (☒ \$40 or ☐ other \$ \_\_\_\_\_)

Unauthorized Foreign Entities (Applicable fee: \$40.00)

- ☐ Business Corporation Law §307  
☐ Not-for-Profit Corporation Law §307  
☐ Limited Liability Company Law §304  
☐ Partnership Law §121-109(b) (LP's)

Suspended Entities (Applicable fee: \$40.00)

- ☐ Business Corporation Law §306-A (suspended BC's)  
☐ Limited Liability Co. Law §301-A (suspended LLC's)  
☐ Partnership Law §121-104-A (suspended LP's)  
☐ Partnership Law §121-1506 (suspended LLP's)

Vehicle and Traffic Law (Applicable fee: \$10.00)

- ☐ Vehicle and Traffic Law §253 (non-resident)  
☐ Vehicle and Traffic Law §254 (former resident)

(4) Indicate the manner in which the applicable fee is paid:

- ☐ Drawdown Account (\_\_\_\_\_) ☒ Check ☐ Credit Card ☐ Debit Card ☐ Cash ☐ Other  
☐ Exempt pursuant to Executive Law §96(10) - process served on behalf of a political subdivision of the State

(5) Indicate the name and address of the Process Server: United Process Services, Inc. 315 Broadway New York, NY 10007-1159

(6) Staple this cover sheet (with the DOS search page(s), if serving a domestic entity or an authorized foreign entity) to the process.

(7) (a) If serving a domestic entity or an authorized foreign entity, deliver two (2) duplicate copies of the process being served (with this cover sheet and the DOS search page(s) stapled thereto) and the applicable fee.

(b) If serving an unauthorized foreign entity or a suspended entity, or if serving under the Vehicle and Traffic Law, deliver one copy of the process being served (with this cover sheet stapled thereto) and the applicable fee. (See Note 3 below)

Note 1: If you attach DOS search page(s), and there is a conflict between the name of the entity as indicated in space "(1)" above and the name on the attached DOS search page(s), **the name provided on the attached DOS search page(s) will control.** Additionally, if you attach DOS search page(s), and space "(1)" above is left blank, **the entity named in the attached DOS search page(s) will be served.**

Note 2: If you attach DOS search page(s), and there is a conflict between the section of law indicated in space "(3)" above and the section of law applicable to the type of entity described in the attached DOS search page(s), **the section of law applicable to the entity will control.**

Note 3: If you are serving an unauthorized foreign entity or a suspended entity, or if you are serving under the Vehicle and Traffic Law, you, or the person on whose behalf service is being made, may also be required to mail notice of service and a copy of the process to the entity or person being served. **The Department of State does not make any such mailing.** See the applicable section of law for further information.

**FOR DOS USE ONLY**

Service of Process Unit Search Results: ☐ Records Located ☐ No Records Located ☐ Entity Name has Changed ☐ Merged Out  
☐ Other: \_\_\_\_\_

**Reason for Rejection:**

☐ Copies do not Match ☐ 2 Copies Required ☐ Court/Forum not within NYS ☐ Payment not Received or Method not Indicated

☐ Other: \_\_\_\_\_ Date of Rejection: \_\_\_\_\_ Rejected by: \_\_\_\_\_

DOS-0277(Rev. 3/08)

Signature of Clerk or Deputy Clerk



AO 440 (Rev. 02/09) Summons in a Civil Action (Page 2)

Civil Action No. \_\_\_\_\_

**PROOF OF SERVICE**

*(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))*

This summons for *(name of individual and title, if any)* \_\_\_\_\_  
was received by me on *(date)* \_\_\_\_\_.

☐ I personally served the summons on the individual at *(place)* \_\_\_\_\_  
on *(date)* \_\_\_\_\_; or

☐ I left the summons at the individual's residence or usual place of abode with *(name)* \_\_\_\_\_  
\_\_\_\_\_, a person of suitable age and discretion who resides there,  
on *(date)* \_\_\_\_\_, and mailed a copy to the individual's last known address; or

☐ I served the summons on *(name of individual)* \_\_\_\_\_, who is  
designated by law to accept service of process on behalf of *(name of organization)* \_\_\_\_\_  
on *(date)* \_\_\_\_\_; or

☐ I returned the summons unexecuted because \_\_\_\_\_; or

☐ Other *(specify)*: \_\_\_\_\_

My fees are \$ \_\_\_\_\_ for travel and \$ \_\_\_\_\_ for services, for a total of \$ \_\_\_\_\_ 0.00.

I declare under penalty of perjury that this information is true.

Date: \_\_\_\_\_

\_\_\_\_\_  
*Server's signature*

\_\_\_\_\_  
*Printed name and title*

\_\_\_\_\_  
*Server's address*

Additional information regarding attempted service, etc:

AO 440 (Rev. 02/09) Summons in a Civil Action

**UNITED STATES DISTRICT COURT**

for the

Eastern District of New York

Allstate Insurance Company, Allstate Indemnity Company,  
Allstate Property & Casualty Insurance Company, Allstate New Jersey Insurance  
Company, and Allstate Vehicle and Property Insurance Company F/K/A Deerbrook  
Insurance Company

*Plaintiff*

v.

Alexander Bank, Robert D. Solomon, M.D., Richmond Radiology, P.C., and ALBA Management, Inc.

*Defendant*

Civil Action No.

**SUMMONS IN A CIVIL ACTION**

To: *(Defendant's name and address)* Robert D. Solomon, M.D.  
110 Coves Run  
Oyster Bay, NY 11771

A lawsuit has been filed against you.

Within 20 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

Richard King, Esq.  
Smith & Brink, P.C.  
1325 Franklin Ave, Ste 320  
Garden City, NY 11530

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

*CLERK OF COURT*

Date: \_\_\_\_\_

\_\_\_\_\_  
*Signature of Clerk or Deputy Clerk*

AO 440 (Rev. 02/09) Summons in a Civil Action (Page 2)

Civil Action No. \_\_\_\_\_

**PROOF OF SERVICE**

*(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))*

This summons for *(name of individual and title, if any)* \_\_\_\_\_  
was received by me on *(date)* \_\_\_\_\_.

☐ I personally served the summons on the individual at *(place)* \_\_\_\_\_  
on *(date)* \_\_\_\_\_; or

☐ I left the summons at the individual's residence or usual place of abode with *(name)* \_\_\_\_\_  
\_\_\_\_\_, a person of suitable age and discretion who resides there,  
on *(date)* \_\_\_\_\_, and mailed a copy to the individual's last known address; or

☐ I served the summons on *(name of individual)* \_\_\_\_\_, who is  
designated by law to accept service of process on behalf of *(name of organization)* \_\_\_\_\_  
on *(date)* \_\_\_\_\_; or

☐ I returned the summons unexecuted because \_\_\_\_\_; or

☐ Other *(specify)*: \_\_\_\_\_

My fees are \$ \_\_\_\_\_ for travel and \$ \_\_\_\_\_ for services, for a total of \$ \_\_\_\_\_ 0.00.

I declare under penalty of perjury that this information is true.

Date: \_\_\_\_\_

\_\_\_\_\_  
*Server's signature*

\_\_\_\_\_  
*Printed name and title*

\_\_\_\_\_  
*Server's address*

Additional information regarding attempted service, etc:

DOS-0277(Rev. 3/08)

AO 440 (Rev. 02/09) Summons in a Civil Action

---

---

UNITED STATES DISTRICT COURT

for the

Eastern District of New York

Allstate Insurance Company, Allstate Indemnity Company,  
Allstate Property & Casualty Insurance Company, Allstate New Jersey Insurance  
Company, and Allstate Vehicle and Property Insurance Company F/K/A Deerbrook  
Insurance Company

*Plaintiff*

v.

Alexander Bank, Robert D. Solomon, M.D., Richmond Radiology, P.C., and ALBA Management, Inc.

*Defendant*

Civil Action No.

**SUMMONS IN A CIVIL ACTION**

To: *(Defendant's name and address)* Richmond Radiology, P.C.  
c/o New York Secretary of State  
1 Commerce Plaza  
99 Washington Avenue  
Albany, NY 12231

A lawsuit has been filed against you.

Within 20 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney,

whose name and address are: Richard King, Esq.  
Smith & Brink, P.C.  
1325 Franklin Ave, Ste 320  
Garden City, NY 11530

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

CLERK OF COURT

Date: \_\_\_\_\_

\_\_\_\_\_  
*Signature of Clerk or Deputy Clerk*

Civil Action No. \_\_\_\_\_

**PROOF OF SERVICE***(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))*

This summons for *(name of individual and title, if any)* \_\_\_\_\_  
 was received by me on *(date)* \_\_\_\_\_.

☐ I personally served the summons on the individual at *(place)* \_\_\_\_\_  
 \_\_\_\_\_ on *(date)* \_\_\_\_\_; or

☐ I left the summons at the individual's residence or usual place of abode with *(name)* \_\_\_\_\_  
 \_\_\_\_\_, a person of suitable age and discretion who resides there,  
 on *(date)* \_\_\_\_\_, and mailed a copy to the individual's last known address; or

☐ I served the summons on *(name of individual)* \_\_\_\_\_, who is  
 designated by law to accept service of process on behalf of *(name of organization)* \_\_\_\_\_  
 \_\_\_\_\_ on *(date)* \_\_\_\_\_; or

☐ I returned the summons unexecuted because \_\_\_\_\_; or

☐ Other *(specify)*: \_\_\_\_\_

My fees are \$ \_\_\_\_\_ for travel and \$ \_\_\_\_\_ for services, for a total of \$ \_\_\_\_\_ 0.00.

I declare under penalty of perjury that this information is true.

Date: \_\_\_\_\_

\_\_\_\_\_  
*Server's signature*

\_\_\_\_\_  
*Printed name and title*

\_\_\_\_\_  
*Server's address*

Additional information regarding attempted service, etc: